

DEC-10-2007 MON 07:24 PM BSKB FAX 401

FAX NO. 7032058050 **RECEIVED** P. 01**CENTRAL FAX CENTER****DEC 10 2007****FAX TRANSMISSION****DATE:** December 10, 2007**PTO IDENTIFIER:** Application Number 10/541,072-Conf. #4138  
Patent Number**Inventor:** Valérie LEJEUNE**MESSAGE TO:** US Patent and Trademark Office**FAX NUMBER:** (571) 273-8300**FROM:** BIRCH, STEWART, KOLASCH & BIRCH, LLP

Robert F. Gnuse

**PHONE:** (703) 205-8000**Attorney Dkt. #:** 3888-0110PUS1**PAGES (Including Cover Sheet):** 14**CONTENTS:** Fax Cover Sheet (1 page)  
Certificate of Transmission (1 page)  
Fee Transmittal (1 page)  
One Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page)  
Charge \$120.00 to deposit account 02-2448  
Amendment in Resposne to Non-Final Office Action (10 pages)

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PTO/SB/97 (09-04)

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Application No. (if known): 10/541,072

Attorney Docket No.: 3888-0110PUS1

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**CENTRAL FAX CENTER**

P. 03

**DEC 10 2007**

PTO/SB/17 (10-07)

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<b>Effective on 12/08/2004.</b> <b>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 418).</b> <b>FEE TRANSMITTAL</b> <b>For FY 2008</b>		<b>Complete if Known</b>	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number: 10/541,072-Conf. #4138	Filing Date: May 15, 2006
<b>TOTAL AMOUNT OF PAYMENT</b> (\$) 320.00		First Named Inventor: Valerie LEJEUNE	Examiner Name: E. A. Robinson
		Art Unit: 1773	Attorney Docket No.: 3888-0110PUS1

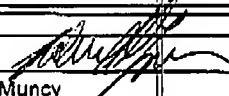
  

<b>METHOD OF PAYMENT (check all that apply)</b>	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	<input checked="" type="checkbox"/> Deposit Account    Deposit Account Number: 02-2448    Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Credit any overpayments

<b>FEE CALCULATION</b>							
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>							
		<b>FILING FEES</b>		<b>SEARCH FEES</b>		<b>EXAMINATION FEES</b>	
<u>Application Type</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fees Paid (\$)</u>
Utility	310	155	510	255	210	105	
Design	210	105	100	50	130	65	
Plant	210	105	310	155	160	80	
Reissue	310	155	510	255	620	310	
Provisional	210	105	0	0	0	0	
<b>2. EXCESS CLAIM FEES</b>							
<u>Fee Description</u>						<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>
Each claim over 20 (including Reissues)						50	25
Each independent claim over 3 (including Reissues)						210	105
Multiple dependent claims						370	185
<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>		<u>Multiple Dependent Claims Fee (\$)</u>		<u>Fee Paid (\$)</u>
24	- 20	4	200				
HP = highest number of total claims paid for, if greater than 20							
<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>				
2	- 3						
HP = highest number of independent claims paid for, if greater than 3.							
<b>3. APPLICATION SIZE FEE</b>							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>			
	- 100 =	/ 50 =	(round up to a whole number) x				
<b>4. OTHER FEE(S)</b>							
Non-English Specification, \$130 fee (no small entity discount)				<u>Fees Paid (\$)</u>			
Other (e.g., late filing surcharge): 1251 Extension for response within first month				120.00			

<b>SUBMITTED BY</b>			
Signature		Registration No. (Attorney/Agent)	32,334
Name (Print/Type)	Joe McKinney Muncy	Telephone	(703) 205-8026
		Date	December 10, 2007

**ROBERT F. GNUSE**  
**Registration # 27295**

Birch, Stewart, Kolasch &amp; Birch, LLP

KM/RFG/jmc